** 32 33		900
LOBBYING EXPENDI  COVERING JANUARY 1  DUE AUGUST 15  COVERING JULY 1 THR  DUE FERRUARY 15	THROUGH JUNE 30 OUGH DECEMBER 31, 2 9 0 2	Johbyist's Registration Number FOR OFFICE USE ONLY
		Postmark Date: 1(21 (12)
82.5500000	ctions	FRZ
<ul> <li>Print in ink of type.</li> <li>Fill in Registration Number in spaces per Complete form and return to the Board Haton Rouge, LA 70808 (225) 763-8.</li> <li>This form must be delivered or post.</li> <li>This form may be fixed to (225) 763-8.</li> </ul>	l of Ethics, 2415 Duail Dr., 3 <sup>th</sup> Floot, 777 or (800) 842-6630. marked by the due date.	1022029 Missing another of pages we like it and held no information there.
1. Name Alligar	DONALD	1.
last	Pital	<u> М</u>
Mailing Address 5/477  3. Business Phone 2 25 -		700, BATON ROUGE, LA 70801-170 S  City State Zip
4. Total of all expenditures made (include expenditures from Schedules A	January 1 through lune 30: and B)	s123,50
5. Total of all expenditures made (When Applicable) (include esp		\$
6. Total of all expenditures made (Line 4 added with Line 5 should equal		s <u>177.50</u>
7. Did you make an expenditure	exceeding \$50 on one occasion	for any one legislator:
From January 1 through June From July 1 through December		No D NA 53
If the answer to either question	in Number 7 above is YES, ple	ease complete Schedule A and attachi.

Folimieus Fect. 1962

## LOBBYING EXPENDITURE REPORT

299 Lobbyist's Registration Number

	Did you make expenditures exceeding		22000	m/s			
	From January 1 through June 30? From July 1 through December 31?		Yes Yes	No No		NA	
	If the answer to either question in Ne	mber 8	8 above is	YES, please con	mplete S	chedule A	and attach.
9,	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?						
	☐ Yes			☑ No			
	If the answer to Number 9 above is 3	YES, p	olease con	nplete Schedule	B and at	iach.	
	If the answer to Number 9 above is 3	YES, p	olease con	nplete Schedule	B and at	ach.	
				nplete Schedule		ach.	
	CIR	RTIFIC	) MOETĄ	OF <u>ACCURAC</u> Y	• SS - SS		
	CEST  1 bereby certify that the information	RTIFIC	CATION (	OF <u>ACCURACY</u>	cet to th	c best of t	
	CIR	RTIFIC contai	CATION ( ined herein the expense	OF <u>ACCURACY</u> n is true and corr ditures have bee	cet to the	e best of r	; and that no

Form 602, Flev. 10/52